
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: JOSEPH R. PISEGNA

Attorney Docket No.:

UCLAP041/2000-093-1

Application No.: 09/671,764

Examiner: CHIH MINH KAM

Filed: September 27, 2000

Group: 1656

Title: USE OF A PENTAGASTRIN TO
INHIBIT GASTRIC ACID SECRETION OR AS
A DIURETIC

Confirmation No.: 7433

CERTIFICATE OF EFS-WEB TRANSMISSION

I hereby certify that this correspondence is being transmitted electronically through EFS-WEB to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450 on September 27, 2007.

Signed: _____/Tara Hayden/
Tara Hayden

AMENDMENT TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	21	MINUS	31	0	x 25 =	x 50 =
Independent Claims	02	MINUS	04	0	x 100 =	x 200 =
Multiple Dependent Claim Present and Fee Not Previously Paid						
Total					\$	\$

- ☐ Applicant(s) hereby petitions for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$ _____ to cover the additional claim fee and/or extension of time fees.
- ☐ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. _____).

Respectfully submitted,
BEYER WEAVER LLP

/Tom Hunter/

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